spiritual growth. Moreover, its message became diluted and confused by combining conflicting viewpoints. The Critical Psychiatry Network is dedicated to establishing a constructive framework for renewing mental health practice (www.criticalpsychiatry.co.uk).

Competing interests: None declared.

- 1 Bristol Royal Infirmary. Learning from Bristol: the report of the public inquiry into children's heart surgery at the Bristol Royal Infirmary 1984-1995. London: Stationery Office, 2001. (Cm 5207.) www.bristol-inquiry.org.uk/
- Kennedy I. The unmasking of medicine. London: Granada, 1983. Illich I. Limits to medicine. Medical nemesis: the expropriation of health. London: Marion Boyers, 1995.
- Beiser M, Fleming JAE, Kirkpatrick D, Remick RA, eds. Today's priorities in mental health. Miami, FL: Symposia Specialists, 1978.
- Tantum D. The anti-psychiatry movement. In: Berrios GE, Freeman H, eds. 150 Years of British psychiatry, 1841-1991. London: Gaskell, 1991.
- Munro R. Judicial psychiatry in China and its political abuses. *Columbia Journal of Asian Law* 1999;13. www.columbia.edu/cu/asiaweb/ IAL001 1.htm
- Singleton N, Meltzer H, Gatward R. Psychiatric morbidity among prisoners in England and Wales. London: Stationery Office, 1998
- Richman A, Barry A. More and more is less and less. The myth of massive psychiatric need. *Br J Psychiatry* 1985;146:164-8.
- Meltzer H, Gill B, Petticrew M, Hinds K. The prevalence of psychiatric morbidity among adults living in private households. London: HMSO, 1995. (OPCS surveys of psychiatric morbidity in Great Britain, report No 1.
- 10 Zito JM, Safer DJ, dosReis S, Gardner JF, Boles J, Lynch F. Trends in

- prescribing of psychotropic medication in preschoolers. JAMA 2000:283:1025-30
- 11 Lord J, Paisley S. The clinical effectiveness and cost-effectiveness of methylphenidate for hyperactivity in childhood. London: National Institute for Clinical Excellence, 2000. (Version 2.)
- 12 Wender PH. Attention-deficit hyperactivity disorder in adults. Psychiatr Clin North Am 1998;21;761-74
- 13 Charlton BG. Psychopharmacology and the human condition. $J\,R\,$ Soci Med 1998;91:699-701.
- 14 Kessler RC, McGonagle KA, Ahao S, Nelson CB, Hughes M, Eshleman S, et al. Lifetime and 12-month prevalence of DSM-III-R psychiatric disorders in the United States. Results from the national comorbidity survey. Arch Gen Psychiatry 1994;51:8-19.
- 15 Stein MB, Gorman JM. Unmasking social anxiety disorder. J Psychiatry Neurosci 2001:26;185-9.
- 16 Bracken PJ, Petty C, eds. Rethinking the trauma of war. London: Free Association, 1998.
- 17 American Psychiatric Assocation. Diagnostic and statistical manual of mental disorders. 4th ed. Washington: APA, 1994.
- 18 Rosenhan DL. On being sane in insane places. Science 1973;179:250-8.
- 19 Klerman GL. The evolution of a scientific nosology. In: Shershow, JC. Schizophrenia: science and practice. Cambridge, MA: Harvard University
- 20 Jellinek EM. The disease concept of alcoholism. New Haven, CT: Hillhouse Press, 1960.
- 21 Winters E, ed. The collected papers of Adolf Meyer. Vols 1-4. Baltimore: Johns Hopkins Press, 1951-2.
- 22 Wilson M. DSM-III and the transformation of American psychiatry: a history. Am J Psychiatry 1993;150:399-410.
- 23 Bracken P, Thomas P. Post-psychiatry: a new direction for mental health. BMJ 2001; 322:724-7.

When I use a word ...

Medicalization

Take any noun or adjective. Add an -ize to make a verb (see *BMJ* 2001;323:1173). Now change the -ize to -ization. That makes another noun.

Some dislike this neologistic method, because they think that it is nasty, modern, and American to boot. They are wrong. The habit may well be nasty, but it has a long pedigree and the earliest examples are English. Of the 1140 or so -izations listed in the Oxford English Dictionary, the earliest, exorcization and canonization, go back to the 14th century; other early examples include organization and solemnization (15C), cauterization and cicatrization (16C), and authorization and embolization (17C). And authors cited in the earliest examples include Coleridge, De Quincy, Donne, John Evelyn, Joseph Priestley, and Thomas Addison. However, it is true that since 1800 the decade by decade rate of introduction of -izations, compared with other words, has outstripped the expected rate, with a peak of 132 new citations in the 1880s (including atropinization, digitalization, and keratinization), and a disproportionate increase in the rate of coinage since 1950.

Medicalization was coined in the 1960s. Here is an early example, in which the inverted commas that surround the word imply its recency: "Sexually active teen-age girls have a physical examination by a pediatrician, a pelvic examination by a gynecologist, a blood count, urinalysis, tine test and dental survey, followed by home visits by a public-health nurse.... [This] represents a 'medicalization' of sex that is probably self-defeating." (New Engl J Med 1970;283:709).

But dictionaries do not incorporate new words immediately, in case they go away. The Oxford English Dictionary, for example, didn't define medicalization until 1997 (in the third volume of its Additions Series): "To give a medical character to; to involve medicine or medical workers in; to view or interpret in (esp. unnecessarily) medical terms." Indeed, as far as I can determine, medicalization did not appear in any

dictionary until 1987, when it was defined in Jonathon Green's Dictionary of Jargon as a sociological term meaning "the increasing practice of attaching medical labels to behaviour considered as socially or morally undesirable." These definitions imply that by categorizing something as a disease, including natural processes, such as birth, the menopause, and the loss of beauty that accompanies ageing, you make its effects susceptible of being cured or at least ameliorated.

But medicalization was a well established idea long before the word appeared in the dictionaries. It was, after all, highlighted by Ivan Illich in his 1975 diatribe Medical Nemesis, a book that received wide publicity, and vilification, at the time. According to Illich, doctors had medicalized various aspects of life, including ageing, death, pain, patients' expectations, and healing and preventive therapies. This idea was part of a larger thesis: that the things that people traditionally did or organized for themselves were being expropriated by governmental institutions and the so called disabling professions. Institutionalized health care-medicalization-impaired health in the same way that "schools impeded learning; transportation contrived to make feet redundant; communications warped conversation" (BMJ 1995;311:1652-3). Indeed, it is a little surprising that "educationalization," "transportization," and "communicationalization" have not been coined to mirror these ideas. When you next see these words, forget that you read them here first.

In his robust 1978 response to Illich, Medical Hubris, David Horobin pointed out that others had expropriated healing long before doctors did, and without the same benefits. But the -ization technique tends to create ugly words, and ugly words tend to be used pejoratively. Medicalization, despite its often practical benefits, remains a dirty idea, partly because it is regarded as a dirty word.

Jeff Aronson clinical pharmacologist, Oxford